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APPLICANTS

Peer Gil Schmitt, Paris, FRANCE;

\*\* CONTINUING DATA \*\*\*\*\*  
None, TL

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
None, TL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
\*\* 05/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY FRANCE	SHEETS DRAWING 6	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
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ADDRESS  
22907  
BANNER & WITCOFF  
1001 G STREET N W  
SUITE 1100  
WASHINGTON , DC  
20001

TITLE  
Ternary bit line signaling

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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